Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF MICHIGAN	-	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	■ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Christopher First name I Middle name Good Last name and Suffix (Sr., Jr., II, III)	Heidi First name M Middle name Beck Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-2090	xxx-xx-5009

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	■ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live	605 Robin Road	If Debtor 2 lives at a different address:
		Ann Arbor, MI 48103 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Washtenaw	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

	otor 2 Heidi M Beck	a 				Case number (if known)	
Dor	Toll the Court About)	Varus Bank	rumtov Cooo				
7.	Tell the Court About \ The chapter of the			description of each, see	Notice Required	d by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy	
	Bankruptcy Code you are choosing to file under			to the top of page 1 and			
	choosing to the under	☐ Chap	ter 7				
		☐ Chap	ter 11				
		☐ Chap	ter 12				
		■ Chap	ter 13				
8.	How you will pay the fee	abo ord a p	out how you m der. If your atto ore-printed add	nay pay. Typically, if you prney is submitting your press.	are paying the fe payment on your	check with the clerk's office in your local court for more details be yourself, you may pay with cash, cashier's check, or money behalf, your attorney may pay with a credit card or check with	/
				e fee in installments. If <i>Installment</i> s (Official Fo		option, sign and attach the Application for Individuals to Pay	
		but ap _l	t is not require plies to your fa	d to, waive your fee, and amily size and you are ur	I may do so only hable to pay the fo	option only if you are filing for Chapter 7. By law, a judge may, if your income is less than 150% of the official poverty line the fee in installments). If you choose this option, you must fill out (Official Form 103B) and file it with your petition.	at
0	Have you filed for						
9.	Have you filed for bankruptcy within the	No.					
	last 8 years?	☐ Yes.					
			District		When	Case number	
			District		When	Case number	_
			District		When	Case number	_
10.	Are any bankruptcy cases pending or being	■ No					
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.					
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
11.	Do you rent your residence?	■ No.	Go to line	12.			
	residence	☐ Yes.	Has your la	andlord obtained an evic	tion judgment ag	gainst you and do you want to stay in your residence?	
			□ No	. Go to line 12.			
				s. Fill out <i>Initial Stateme</i> nkruptcy petition.	nt About an Evict	tion Judgment Against You (Form 101A) and file it with this	

	tor 1 Christopher I Goo tor 2 Heidi M Beck	d			Case number (if known)			
Par	t3: Report About Any Bu	ısinesses	You Own as a So	le Proprie	etor			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.					
		☐ Yes.	Name and loc	ation of bus	siness			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of busin	ess, if any	, <u> </u>			
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Stree	et, City, Sta	ate & ZIP Code			
	it to this petition.			•	ox to describe your business:			
			☐ Health	Care Busi	iness (as defined in 11 U.S.C. § 101(27A))			
			☐ Single	Asset Rea	al Estate (as defined in 11 U.S.C. § 101(51B))			
			☐ Stockb	roker (as c	defined in 11 U.S.C. § 101(53A))			
			☐ Comm	odity Broke	er (as defined in 11 U.S.C. § 101(6))			
			☐ None o	of the abov	ve			
	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B).					
	For a definition of small	■ No.	I am not filing	under Cha _l	pter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing und Code.	er Chapter	11, but I am NOT a small business debtor according to the definition in the Bankruptcy			
		☐ Yes.	I am filing und	er Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Pari	t 4: Report if You Own or	Have Any	/ Hazardous Prop	erty or An	ny Property That Needs Immediate Attention			
14.	Do you own or have any	■ No.						
	property that poses or is alleged to pose a threat	☐ Yes.						
	of imminent and identifiable hazard to public health or safety?	— 103.	What is the haza	rd?				
	Or do you own any property that needs immediate attention?		If immediate atte					
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the pro	perty?				
					Number, Street, City, State & Zip Code			

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

□ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debt Debt	•	d		Case nun	nber (if known)
Part	6: Answer These Quest	ions for R	Reporting Purposes		
16.	What kind of debts do you have?	16a.	Are your debts primarily	r consumer debts? Consumer debts are dersonal, family, or household purpose."	defined in 11 U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.		
			Yes. Go to line 17.		
		16b.		business debts? Business debts are debousestment or through the operation of the b	
			☐ No. Go to line 16c.		
			☐ Yes. Go to line 17.		
		16c.	State the type of debts yo	u owe that are not consumer debts or busin	ness debts
	Are you filing under Chapter 7?	■ No.	I am not filing under Chap	ter 7. Go to line 18.	
	Do you estimate that after any exempt property is excluded and	☐ Yes.		7. Do you estimate that after any exempt p available to distribute to unsecured creditors	roperty is excluded and administrative expenses ors?
	administrative expenses are paid that funds will		□ No		
	be available for distribution to unsecured creditors?		Yes		
	How many Creditors do	1 -49		1 ,000-5,000	□ 25,001-50,000
	you estimate that you owe?	□ 50-99	9	<u> </u>	<u> </u>
		☐ 100-1 ☐ 200-9		□ 10,001-25,000	☐ More than100,000
	How much do you	□ \$0 - \$	\$50,000	☐ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion
	estimate your assets to be worth?		001 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion
			,001 - \$500,000 ,001 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion
	How much do you	□ \$0 - \$	\$50,000	□ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion
	estimate your liabilities to be?		001 - \$100,000	□ \$10,000,001 - \$50 million	\$1,000,000,001 - \$10 billion
			,001 - \$500,000 ,001 - \$1 million	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion
		ப \$500	.001 - \$1 million		
Part					
For	you	I have ex	xamined this petition, and I	declare under penalty of perjury that the inf	formation provided is true and correct.
				er 7, I am aware that I may proceed, if eligible relief available under each chapter, and	ole, under Chapter 7, 11,12, or 13 of title 11, I choose to proceed under Chapter 7.
				id not pay or agree to pay someone who is the notice required by 11 U.S.C. § 342(b).	
		I request	t relief in accordance with th	e chapter of title 11, United States Code, s	specified in this petition.
			tcy case can result in fines ι		ey or property by fraud in connection with a 10 years, or both. 18 U.S.C. §§ 152, 1341, 1519
		/s/ Chri	stopher I Good	/s/ Heidi M Be	
			opher I Good e of Debtor 1	Heidi M Beck Signature of De	
		Execute	d on August 18, 2016	Executed on _	August 18, 2016

Debtor 1 Debtor 2	Christopher I Goo Heidi M Beck	d	Case number (if known)	
•	attorney, if you are	I, the attorney for the debtor(s) named in this petition under Chapter 7, 11, 12, or 13 of title 11, United Sta	,	, , , ,
•	not represented by	for which the person is eligible. I also certify that I hand, in a case in which § 707(b)(4)(D) applies, certify	ave delivered to the debtor(s) the notice re	equired by 11 U.S.C. § 342(b)

/s/ Michelle Marrs	Date	August 18, 2016
Signature of Attorney for Debtor		MM / DD / YYYY
Michelle Marrs		
Printed name		
Marrs & Terry, PLLC		
Firm name		
6553 Jackson Rd		
Ann Arbor, MI 48103		
Number, Street, City, State & ZIP Code		
Contact phone 734-663-0555	Email address	TTerry@marrsterry.com
P59651		
Bar number & State		

Fill	in this infor	mation to identify your	case:				
	otor 1	Christopher I God					
Dak	utor O	First Name	Middle Name	Last Name			
	otor 2 use if, filing)	Heidi M Beck First Name	Middle Name	Last Name			
Uni	ted States Ba	ankruptcy Court for the:	EASTERN DISTRICT	OF MICHIGAN			
Cas	e number						
(if kn	_					_	k if this is an ded filing
Of	ficial Fo	orm 106Sum					
Su	mmary o	of Your Assets	and Liabilities a	nd Certain Statistical Inform	ation		12/15
nfo	rmation. Fill original for	out all of your schedule	es first; then complete t	le are filing together, both are equally responder the information on this form. If you are filing the box at the top of this page.			lles after you file
							of what you own
1.	Schedule A 1a. Copy lin	A/B: Property (Official Fone 55, Total real estate, for	orm 106A/B) rom Schedule A/B			\$	205,000.00
	1b. Copy lir	ne 62, Total personal pro	perty, from Schedule A/B	3		\$	58,285.05
	1c. Copy lin	ne 63, Total of all property	y on Schedule A/B			\$	263,285.05
Par	t 2: Summ	narize Your Liabilities					
							abilities at you owe
2.			laims Secured by Propert mn A, Amount of claim, a	ty (Official Form 106D) t the bottom of the last page of Part 1 of <i>Sche</i>	dule D	\$	159,251.00
3.	Schedule E 3a. Copy th	E/F: Creditors Who Have ne total claims from Part	Unsecured Claims (Officing 1) (Officing 1) (Officing 2) (ial Form 106E/F) ms) from line 6e of <i>Schedule E/F</i>		\$	0.00
	3b. Copy th	ne total claims from Part	2 (nonpriority unsecured	claims) from line 6j of Schedule E/F		\$	121,986.00
				Your total	liabilities	\$	281,237.00
Par	t 3: Summ	narize Your Income and	Expenses				
4.		Your Income (Official Fo		le I		\$	4,281.60
5.		: Your Expenses (Official monthly expenses from li				\$	3,881.60
Par	4: Answ	er These Questions for	Administrative and Sta	itistical Records			
6.	-	• • •	er Chapters 7, 11, or 13' on this part of the form. (? Check this box and submit this form to the cou	ırt with yo	ur other sc	hedules.
7.	YesWhat kind	of debt do you have?					

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information page 1 of 2

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

3,461.79

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total c	laim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	49,947.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	49,947.00

	4						
Deb		hristopher I Good st Name	Middle Name	Last Name			
Deb	or 2 He	eidi M Beck					
Spou	se, if filing) First	st Name	Middle Name	Last Name			
Jnit	ed States Bankrup	tcy Court for the: EAS	STERN DISTR	ICT OF MICHIGAN			
as	e number						☐ Check if this is an amended filing
	icial Form						
)C	hedule A	VB: Proper	ty				12/15
_	No. Go to Part 2. Yes. Where is the p	property?					
.1	605 Robin Roa	, ,	Wha	t is the property? Check all that apply			
.1	605 Robin Roa Street address, if availa	, ,	What	Single-family home Duplex or multi-unit building Condominium or cooperative	the amount	of any secure	aims or exemptions. Put d claims on Schedule D: ns Secured by Property.
.1		nd	0000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	Current va	of any secure Who Have Clain	d claims on Schedule D: ns Secured by Property. Current value of the portion you own?
.1	Street address, if availa	ad able, or other description MI 48103-0	0000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare	Current va entire prop \$20 Describe ti (such as fe	t of any secured who Have Claim lue of the perty? 05,000.00 he nature of y	d claims on Schedule D: ns Secured by Property. Current value of the
.1	Street address, if availa	ad able, or other description MI 48103-0	0000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one	Current va entire prop \$20 Describe ti (such as fe	lue of the perty? 05,000.00 he nature of yee simple, tense), if known.	d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$205,000.00 our ownership interest
.1	Street address, if availa	ad able, or other description MI 48103-0	0000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only	Current va entire prop \$20 Describe ti (such as fe a life estati	lue of the perty? 05,000.00 he nature of yee simple, tense), if known.	d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$205,000.00 our ownership interest
.1	Street address, if availa Ann Arbor City	ad able, or other description MI 48103-0	0000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Current va entire prop \$20 Describe ti (such as fe a life estati Fee sim	tof any secured who Have Claim lue of the perty? 05,000.00 the nature of yee simple, tende), if known. ple if this is communications)	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$205,000.00 our ownership interest
1	Ann Arbor City Washtenaw	ad able, or other description MI 48103-0	0000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Current va entire prop \$20 Describe ti (such as fe a life estati Fee sim	tof any secured who Have Claim lue of the perty? 05,000.00 the nature of yee simple, tende), if known. ple if this is communications)	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$205,000.00 our ownership interest ancy by the entireties, of

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Debto Debto		Christopher leidi M Bec				Case number (if known)	
3. Car	s, vans	, trucks, trac	ctors, sport utility ve	hicles, motorcycles			
	lo						
■ Y	'es						
3.1	Make:	Toyota		Who has an interest in th	e property? Check one		cured claims or exemptions. Put secured claims on Schedule D:
	Model:	Prius		Debtor 1 only			ve Claims Secured by Property.
	Year:	2009		Debtor 2 only		Current value of	the Current value of the
	Approxir	mate mileage:	- <u></u> -	■ Debtor 1 and Debtor 2	only	entire property?	portion you own?
-	Other in	formation:		At least one of the debt	tors and another		
				Check if this is comm (see instructions)	unity property	\$4,412	2.00 \$4,412.00
■ N □ Y	es d the do	ollar value of	f the portion you ow	n for all of your entries f	rom Part 2, including a	any entries for	444000
.pag	ges you	have attach	ned for Part 2. Write	that number here		=>	\$4,412.00
D. 10	.						
			onal and Household It	ems terest in any of the follov	ving itomo?		Current value of the
Бо уо	u own	or nave any	legal of equitable in	terest in any or the rollov	ving items :		portion you own? Do not deduct secured claims or exemptions.
Exa D I	amples: No	goods and Major appliant	furnishings nces, furniture, linens	, china, kitchenware			
				ances, misc household es, 1 kayak, yard equip)			\$2,000.00
Exa	, No	Televisions a	and radios; audio, vide Il phones, cameras, m	, , ,	pment; computers, print	ers, scanners; music c	collections; electronic devices
			old desktop cor	mputer, laptop compu	ter, Ipad, stereo		\$500.00
Exa	amples:		d figurines; paintings, ions, memorabilia, co		ocks, pictures, or other a	rt objects; stamp, coin,	, or baseball card collections;
■ I		escribe					
9. Eq u	ıipment	for sports a	ographic, exercise, ar	nd other hobby equipment;	bicycles, pool tables, go	olf clubs, skis; canoes	and kayaks; carpentry tools;
= 1							
	Yes. De	escribe					

	ebtor 1 ebtor 2	Christopher Heidi M Bec			Case number (if ki	nown)
			s, shotgu	ns, ammunition, and re	elated equipment	
	■ No □ Yes	Describe				
	□ No ·		othes, fur	s, leather coats, design	ner wear, shoes, accessories	
	_ 100.	20001120				****
			misc	clothing		\$600.00
	□ No		welry, co	stume jewelry, engage	ment rings, wedding rings, heirloom jewelry, watches, ge	ems, gold, silver
			weddi	ng bands		\$200.00
14. 15	Any oth No Yes. Add th for Pa	Give specific informe dollar value of the that scribe Your Finan	ormation of all of y number	our entries from Par	ot already list, including any health aids you did not let 3, including any entries for pages you have attache	State
						portion you own?Do not deduct secured claims or exemptions.
	■ No		·	our wallet, in your hom	e, in a safe deposit box, and on hand when you file your	petition
17.					nts; certificates of deposit; shares in credit unions, broke rith the same institution, list each.	rage houses, and other similar
	□ No ■ Yes				Institution name:	
			17.1.	Savings	Um Credit Union - will be frozen	\$5.00
			17.2.	Checking	UM Credit Union - will be frozen	\$0.00
			17.3.	checking and savings	Bank of Ann Arbor	\$3,200.00

	ebtor 1 ebtor 2	Christopher Heidi M Beck			Case number	(if known)	
18.	Examp		or publicly traded stocks investment accounts with	brokerage firms, money market ac	counts		
	■ No □ Yes		Institution or issu	er name:			
19.	-	ublicly traded sto enture	ock and interests in inco	rporated and unincorporated bu	sinesses, including a	an interest in	an LLC, partnership, and
		Give specific info	ormation about them Name of entity:		% of owners	hip:	
				Weather (band) - 2 bass c guitar, 4 hand drums, pian	o 100%	%	\$1,500.00
			Mutual Kumquat (CDs)	(band) - merchandise (t-shirt	100%	%	\$5,000.00
20.	Negoti Non-ne ■ No	iable instruments egotiable instrume	include personal checks, o	egotiable and non-negotiable ins cashiers' checks, promissory notes transfer to someone by signing or	s, and money orders.		
21.	Retiren	nent or pension	Issuer name:), 403(b), thrift savings accounts, o	or other pension or prof	iit-sharing pla	าร
	Yes.	List each account	separately. Type of account:	Institution name:			
			Type of account.	TSP			\$34,958.98
			Roth IRA	Calvert Investment			\$4,417.90
			Roth IRA	Ivy Funds			\$1,227.22
22.	Your s Examp		d deposits you have made	so that you may continue service nt, public utilities (electric, gas, wat			, or others
	■ No □ Yes.			Institution name or indivi	dual:		
23.	Annuiti ■ No	ies (A contract for	r a periodic payment of mo	oney to you, either for life or for a r	number of years)		
	☐ Yes	lss	uer name and description				
24.			n IRA, in an account in a 29A(b), and 529(b)(1).	a qualified ABLE program, or un	der a qualified state t	uition progra	am.
	☐ Yes	Ins	stitution name and descript	tion. Separately file the records of	any interests.11 U.S.C	5. § 521(c):	
25.	_ `	, equitable or fut	ure interests in property	(other than anything listed in lin	ne 1), and rights or po	owers exerci	sable for your benefit
	■ No □ Yes.	Give specific info	ormation about them				
	Patents	s, copyrights, tra	ndemarks, trade secrets,	and other intellectual property seeds from royalties and licensing	agreements		

Debtor 1 Debtor 2	Christopher I G Heidi M Beck	ood	Case number (if known)	
☐ Yes	. Give specific inform	ation about them		
Exan ■ No		other general intangibles , exclusive licenses, cooperative association holdings	s, liquor licenses, professional licenses	
	·			
Money o	property owed to yo	ou?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28. Tax re ■ No	efunds owed to you			
☐ Yes	. Give specific informa	tion about them, including whether you already filed	the returns and the tax years	
Exan ■ No	y support nples: Past due or lum . Give specific informa	p sum alimony, spousal support, child support, maint	enance, divorce settlement, property sett	tlement
Exan		disability insurance payments, disability benefits, sick loans you made to someone else	pay, vacation pay, workers' compensat	ion, Social Security
31. Intere	sts in insurance poli		edit, homeowner's, or renter's insurance	
_	. Name the insurance	company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
		whole Life through North American Company for Life and Health Insurance	Heidi Beck	\$0.00
		whole life policy through United Farm Family Life Ins Company	Christopher Good	\$263.95
		whole life insurance Cincinnati Life Insurance Company	Heidi Beck	\$0.00
		whole life insurance Cincinnati Life Insurance Company	Christopher Good	\$0.00
If you some		nat is due you from someone who has died a living trust, expect proceeds from a life insurance particular.	policy, or are currently entitled to receive	property because
Exan ■ No		es, whether or not you have filed a lawsuit or mad oyment disputes, insurance claims, or rights to sue	e a demand for payment	

Debtor Debtor	•		Case number (if known)	
34. Otl	er contingent and unliquidated claims of every nature, inclu	uding counterclaims	of the debtor and rights to set o	off claims
	lo			
	es. Describe each claim			
35. An	y financial assets you did not already list			
	lo			
	es. Give specific information			
	dd the dollar value of all of your entries from Part 4, includir r Part 4. Write that number here		jes you have attached	\$50,573.05
Part 5:	Describe Any Business-Related Property You Own or Have an Inte	rest In. List any real esta	ate in Part 1.	
37. Do y	ou own or have any legal or equitable interest in any business-relat	ted property?		
■ No	o. Go to Part 6.			
☐ Ye	s. Go to line 38.			
Part 6:	Describe Any Farm- and Commercial Fishing-Related Property You lf you own or have an interest in farmland, list it in Part 1.	ມ Own or Have an Interes	st In.	
46 Do	you own or have any legal or equitable interest in any farm-	- or commercial fishir	ng-related property?	
_	No. Go to Part 7.		ig rolated property:	
_	Yes. Go to line 47.			
_				
Part 7:	Describe All Property You Own or Have an Interest in That Yo	u Did Not List Above		
Ex	you have other property of any kind you did not already list amples: Season tickets, country club membership to ses. Give specific information	?		
54. A	dd the dollar value of all of your entries from Part 7. Write th	nat number here		\$0.00
	·			·
Part 8:	List the Totals of Each Part of this Form			
55. P	art 1: Total real estate, line 2			\$205,000.00
	art 2: Total vehicles, line 5	\$4,412.00	_	Ψ200,000.00
	art 3: Total personal and household items, line 15	\$3,300.00		
58. P	art 4: Total financial assets, line 36	\$50,573.05		
59. P	art 5: Total business-related property, line 45	\$0.00		
60. P	art 6: Total farm- and fishing-related property, line 52	\$0.00		
61. P	art 7: Total other property not listed, line 54 +	\$0.00		
62. T	otal personal property. Add lines 56 through 61	\$58,285.05	Copy personal property total	\$58,285.05
63. T	otal of all property on Schedule A/B. Add line 55 + line 62			\$263,285.05

						_
Fi	I in this inform	nation to identify your case:				
De	ebtor 1	Christopher I Good				
De	ebtor 2	First Name	Middle Name	L	ast Name	
	ouse if, filing)	First Name	Middle Name	L	ast Name	
Ur	nited States Bar	nkruptcy Court for the: EAS	TERN DISTRICT OF M	ICHIG	SAN	
Ca	ase number					
(if k	known)					☐ Check if this is an amended filing
O	fficial For	rm 106C				
S	chedule	e C: The Prope	rty You Cla	im	as Exempt	4/16
the nee cas Fo i spe	property you liseded, fill out and se number (if known teach item of pecific dollar am	sted on Schedule A/B: Property d attach to this page as many coown). property you claim as exemp nount as exempt. Alternative	y (Official Form 106A/B) copies of <i>Part 2: Addition</i> ot, you must specify the ly, you may claim the f	as yo nal Pa e amo	our source, list the property that you age as necessary. On the top of any ount of the exemption you claim. ir market value of the property be	additional pages, write your name and One way of doing so is to state a ing exempted up to the amount of
fun exe	ds—may be un emption to a pa	nlimited in dollar amount. Ho	wever, if you claim an	exen	nption of 100% of fair market valu	enefits, and tax-exempt retirement e under a law that limits the t, your exemption would be limited
Pa	rt 1: Identify	y the Property You Claim as	Exempt			
1.	Which set of	exemptions are you claiming	? Check one only, eve	n if vo	our spouse is filing with you.	
	_	aiming state and federal nonba	,	•	, , ,	
	_	G	. , .		0.0.3 022(2)(0)	
^		aiming federal exemptions. 11			Clinia de la factamenta de la lacción	
2.			-		fill in the information below.	
		on of the property and line on hat lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
De	ebtor 1 Exem 605 Robin F	<u>ptions</u> Road Ann Arbor, MI 48103		_	\$23,675.00	11 U.S.C. § 522(d)(1)
	Washtenaw	_	Ψ203,000.00	_		
	Line from Sch	edule A/B: 1.1		Ц	100% of fair market value, up to any applicable statutory limit	
		opliances, misc goods, trumpet,	\$2,000.00		\$1,000.00	11 U.S.C. § 522(d)(3)
	trombone, f yard equipn more than \$	iddle, 2 bicycles, 1 kayak nent (no one thing worth	,		100% of fair market value, up to any applicable statutory limit	
		computer, laptop	\$500.00		\$250.00	11 U.S.C. § 522(d)(3)
	computer, I Line from Sch	pad, stereo edule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
	misc clothir	าต	****		* 000 00	11 U.S.C. § 522(d)(3)
		·9	\$600.00		\$300.00	5.5.5. 3 5(4)(5)

Official Form 106C

Schedule C: The Property You Claim as Exempt

Line from Schedule A/B: 11.1

100% of fair market value, up to any applicable statutory limit

	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
	wedding bands Line from Schedule A/B: 12.1	\$200.00		\$100.00	11 U.S.C. § 522(d)(4)	
	Line nom schedule A/D. 12.1			100% of fair market value, up to any applicable statutory limit		
	Savings: Um Credit Union - will be frozen	\$5.00		\$2.50	11 U.S.C. § 522(d)(5)	
	Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit		
	checking and savings: Bank of Ann Arbor	\$3,200.00		\$1,247.50	11 U.S.C. § 522(d)(5)	
	Line from Schedule A/B: 17.3			100% of fair market value, up to any applicable statutory limit		
	Friends With The Weather (band) - 2 bass guitars, 1 acoustic guitar, 4	\$1,500.00		\$1,500.00	11 U.S.C. § 522(d)(6)	
	hand drums, piano 100% Line from <i>Schedule A/B</i> : 19.1			100% of fair market value, up to any applicable statutory limit		
	Mutual Kumquat (band) - merchandise (t-shirts, CDs)	\$5,000.00		\$875.00	11 U.S.C. § 522(d)(6)	
	100% Line from Schedule A/B: 19.2			100% of fair market value, up to any applicable statutory limit		
	Roth IRA: Ivy Funds Line from Schedule A/B: 21.3	\$1,227.22		\$1,227.22	11 U.S.C. § 522(d)(12)	
	Line from Generalic Add. 2110			100% of fair market value, up to any applicable statutory limit		
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every 3	3 years after that for ca	ses fi	·	,	
	☐ Yes. Did you acquire the property covere☐ No	ed by the exemption wi	thin 1	,215 days before you filed this case	?	
	☐ Yes					

Fill in this infor	mation to identify your	case:		
Debtor 1				
	First Name	Middle Name	Last Name	
Debtor 2	Heidi M Beck			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F MICHIGAN	
Case number				
(if known)				☐ Check if this is an amended filing

Part 1: Identify the Property You Claim as Exempt

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

De	ebtor 2 Exemptions 605 Robin Road Ann Arbor, MI 48103	\$205.000.00	_	\$23.675.00	11 U.S.C. § 522(d)(1)
		Copy the value from Schedule A/B	Check only one b	ox for each exemption.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the ex	xemption you claim	Specific laws that allow exemption
2.	For any property you list on Schedule A/B	that you claim as exe	empt, fill in the in	formation below.	
	■ You are claiming federal exemptions. 11 l	U.S.C. § 522(b)(2)			
	☐ You are claiming state and federal nonban	kruptcy exemptions.	11 U.S.C. § 522(b	0)(3)	
١.	which set of exemptions are you claiming	Check one only, eve	n it your spouse is	s tiling with you.	

	Ochcadic A/D		
btor 2 Exemptions 605 Robin Road Ann Arbor, MI 48103 Washtenaw County Line from <i>Schedule A/B</i> : 1.1	\$205,000.00	\$23,675.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(1)
furniture, appliances, misc household goods, trumpet,	\$2,000.00	\$1,000.00	11 U.S.C. § 522(d)(3)
trombone, fiddle, 2 bicycles, 1 kayak, yard equipment (no one thing worth more than \$525) Line from Schedule A/B: 6.1		100% of fair market value, up to any applicable statutory limit	
old desktop computer, laptop computer, lpad, stereo	\$500.00	\$250.00	11 U.S.C. § 522(d)(3)
Line from Schedule A/B: 7.1		100% of fair market value, up to any applicable statutory limit	
misc clothing Line from Schedule A/B: 11.1	\$600.00	\$300.00	11 U.S.C. § 522(d)(3)
LINE HOIN SCREAULE AVB: 11.1		100% of fair market value, up to any applicable statutory limit	

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 3 of 4

	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own			Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
	wedding bands Line from Schedule A/B: 12.1	\$200.00	•	\$100.00	11 U.S.C. § 522(d)(4)	
				100% of fair market value, up to any applicable statutory limit		
	checking and savings: Bank of Ann Arbor	\$3,200.00		\$1,250.00	11 U.S.C. § 522(d)(5)	
	Line from Schedule A/B: 17.3			100% of fair market value, up to any applicable statutory limit		
	TSP Line from Schedule A/B: 21.1	\$34,958.98		\$34,958.98	11 U.S.C. § 522(d)(12)	
	Ente nom concease 702.			100% of fair market value, up to any applicable statutory limit		
	Roth IRA: Calvert Investment Line from Schedule A/B: 21.2	\$4,417.90		\$4,417.90	11 U.S.C. § 522(d)(12)	
				100% of fair market value, up to any applicable statutory limit		
	whole life policy through United Farm Family Life Ins Company	\$263.95		\$263.95	11 U.S.C. § 522(d)(8)	
	Beneficiary: Christopher Good Line from Schedule A/B: 31.2			100% of fair market value, up to any applicable statutory limit		
 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) No 						
	☐ Yes. Did you acquire the property covere	ed by the exemption wi	ithin 1	,215 days before you filed this case	?	
	□ No					
	☐ Yes					

Fill in this inform	ation to identify you	ır case:			
Debtor 1	Christopher I G	ood			
	First Name	Middle Name Last Name		-	
Debtor 2 (Spouse if, filing)	Heidi M Beck First Name	Middle Name Last Name		-	
United States Ban	kruptcy Court for the	EASTERN DISTRICT OF MICHIGAN		-	
Case number					
(if known)				_	if this is an
				ameno	led filing
Official Form	106D				
		Who Have Claims Secure	ed by Propert	V	12/15
				<u>-</u>	
		If two married people are filing together, both are cout, number the entries, and attach it to this form.			
number (if known).					
	nave claims secured by				
_		his form to the court with your other schedules.	You have nothing else	to report on this form.	
Yes. Fill in	all of the information	below.			
Part 1: List All	Secured Claims		0.4	0.1	0.1
		more than one secured claim, list the creditor separate		Column B	Column C
		s a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
2.1 Capital Mto	g Svcs Of Te	Describe the property that secures the claim:	value of collateral. \$152,718.00	claim \$205,000.00	If any \$0.00
Creditor's Name	9 0 7 0 1 1 0	605 Robin Road Ann Arbor, MI	Ψ132,710.00	Ψ203,000.00	Ψ0.00
		48103 Washtenaw County			
4040 5045	0.	As of the date you file, the claim is: Check all that			
4212 50th 5 Lubbock, 5		apply.			
	City, State & Zip Code	☐ Contingent ☐ Unliquidated			
	эн, энн эн ж	☐ Disputed			
Who owes the del	ot? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only		An agreement you made (such as mortgage or s	secured		
Debtor 2 only		car loan)			
Debtor 1 and Deb		☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ Check if this cla	e debtors and another	☐ Judgment lien from a lawsuit☐ Other (including a right to offset)			
community deb		Cities (including a right to onset)			
	Opened				
	01/15 Last				
	Active	4574			
Date debt was incu	rred 7/01/16	Last 4 digits of account number 1571	<u> </u>		
22 Harrie N.a.		Describe the property that accuracy the claims	\$6,533.00	¢4 412 00	¢2 424 00
2.2 Harris N.a. Creditor's Name	·	Describe the property that secures the claim: 2009 Toyota Prius	φ0,333.00	\$4,412.00	\$2,121.00
Bmo Harri	s Bank -	2000 Toyota Tituo			
•	y DeptBrk-1	As of the date you file, the claim is: Check all that			
770 N Wate Milwaukee		apply.			
	City, State & Zip Code	☐ Contingent ☐ Unliquidated			
Hamber, Sueet,	ony, orace a zip oode	☐ Disputed			
Who owes the deb	ot? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only		☐ An agreement you made (such as mortgage or s	secured		
Debtor 2 only		car loan)			
Debtor 1 and Del	=	☐ Statutory lien (such as tax lien, mechanic's lien)			
	e debtors and another	☐ Judgment lien from a lawsuit			

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 2

Debtor 1	Christoph	ier I Good		Case number (if know)
	First Name	Middle Name	ame Last Name	<u> </u>
Debtor 2	Heidi M Be	eck		
	First Name	Middle Name	Last Name	_
☐ Check if this claim re		elates to a Of	ther (including a right to offset)	Purchase Money Security
		Opened 02/13 Last Active		
Date debt	was incurred	7/21/16	Last 4 digits of account nun	mber <u>7707</u>
		•	A on this page. Write that nur	· · · · · · · · · · · · · · · · · · ·
	the last page at number here		llar value totals from all pages	s. \$159,251.00

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

Debtor 1 Christopher I Good First Name Middle Name Last Name Heidli M Beck (Spouse & Berk Name Middle Name Last Name Heidli M Beck First Name Middle Name Last Name United States Bankruptcy Court for the: EASTERN DISTRICT OF MICHIGAN Case number (Vinouer) Check if this is an amended filling Check if this is an amended and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule All Property (Official Form 169AR9) and on any executory contracts on unexpired leases (Official Form 169CB). Don for licitude any creditors with partially securate interval to any executory contracts on schedule All Property (Official Form 169AR9) and on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Tart 1: List All of Your PRIORITY Unsecured Claims Description of Page 1									
Debtor 2 Spaces f, filing) White States Bankruptcy Court for the: EASTERN DISTRICT OF MICHIGAN Case number (if texam) Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NoNPRIORITY claims. List the other party to any executory contracts or inscripted leases that could result in a claim. Also list executory contracts on Schedule AIR. Property (Official Form 106AP) and on representation of the continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify, what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim have and show both priority and nonpriority amounts. A many cannot be any or priority unsecured claims, list enter creditors in Part and the priority was mounts. A many and the priority amounts. A many and the priority amount. A many and the priorit	Fi	II in this inform	ation to identify your case:						
Debtor 2 Hacidi M Beck Case Hacidi M Beck First Name Middle Name Last Name	De	ebtor 1	Christopher I Good						
United States Bankruptcy Court for the: EASTERN DISTRICT OF MICHIGAN Case number (if known) Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexprised leases that could result in a claim. Also list executory contracts on Schedule B-Froperty (Official Form 1066/B). Do not include any creditors with partially secured claims that are listed in Schedule 6: Executory Contracts and Unexpired Leases (Official Form 1066/B). Do not include any creditors with partially secured claims that are listed in Schedule 0: Certification Plage to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 13: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? 1. No 6 to Part 2: 1. Yes. 2. List all deflow priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor apparately for each claim. For each claim listed, defined the claim is list a claim has both priority and nonpriority amounts. Its that claim has both priority and nonpriority amounts. Its that claim has both priority and nonpriority amounts. Its that claim has both priority and nonpriority amounts. As much as possible, list the claims is plantable clay of according to the creditor's name. If you have nove than two priority unsecured claims, lift out the Continuation Page of Part 1. If more than one or creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) 1. Internal Revenue Service 2.1 Internal Revenue Service 2.2 Internal Revenue Service 2.3 As of the date you file, the claim is: Check all that apply 3. When was the debt inc			<u> </u>	ddle Name	Last Name				
United States Bankruptcy Court for the:EASTERN DISTRICT OF MICHIGAN									
Case number (If known) Check if this is an amended filing	(Sp	oouse if, filing)	First Name Mi	ddle Name	Last Name				
Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible, Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule AIE. Property (Official Form 106A/B) and on Schedule D: Creditors with partially secured claims that are listed in Schedule D: Creditors with partially secured claims that are listed in Schedule D: Creditors with partially secured claims that are listed in Schedule D: Creditors who have Claims Secured by Property. If more space is needed, copy the Part you need, fill if out, number the entries in the boxes on the left. Attach the Continuation Page to this page, if you have no information to report in a Part, do not fige that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it.s. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in sphabetical order according to the creditors name, If you have more than two priority unsecured claims. For each claim listed, identify what type of claim, see the instructions for this form in the instruction booklet.) Internal Revenue Service Priority Creditor's Name. PO Box 7346 Philadelphia, PA 19101 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Priority Creditor's Name. As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Domestic support obligation	Ur	nited States Ban	kruptcy Court for the: EASTE	RN DISTRICT	OF MICHIGAN				
Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NoNPRIORITY claims. List the other party to any executory contracts or unserprice leases that could result in a claim. Also dist executory contracts on Schedule A/B: Property (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who have claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim is is. If a claim has both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the chefor ceditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Internal Revenue Service Priority Creditor's Name PO Box 7346 Philadelphia, PA 19101 As of the date you file, the claim is: Check all that apply When was the debt incurred? Debtor 1 and Debtor 2 o	1								
Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases of the claim also list executory contracts on Schedule AB: Property (Official Form 106AB) and on Schedule 2. Executory Contracts and Unexpired Leases (Official Form 106AB) and on Schedule 2. Executory Contracts and Unexpired Leases (Official Form 106AB) and on Schedule 2. Executory Contracts and Unexpired Leases (Official Form 106AB) and on Schedule 2. Executory Contracts and Unexpired Leases (Official Form 106AB) and on Schedule 2. Executory Contracts and Unexpired Leases (Official Form 106AB) and on Schedule 2. Executory Contracts and Unexpired Leases (Official Form 106AB) and on Schedule 2. Executory Contracts and Unexpired Leases (Official Form 106AB) and on Schedule 2. Executory Contracts and Unexpired Leases (Official Form 106AB) and on Schedule 2. Executory Contracts and Unexpired Leases (Official Form 106AB) and on Schedule 2. Executory Contracts and Unexpired Leases (Official Form 106AB) and on Schedule 2. Executory Contracts and Unexpired Leases (Official Form 106AB) and on Schedule 2. Executory Contracts and Unexpired Leases (Official Form 106AB) and on Schedule 2. Executory Contracts and Unexpired Leases (Official Form 106AB) and Contracts and University August 1. Except School Leases (Official Form 106AB) and University and University and University and Un	(if I	known)					_		
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Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule AB: Property (Official Form 106A/B) and on Schedule 5: Executory Contracts and Unexpired Leases (Official Form 106A/B) and on Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims No. Go to Part 2.				ave Unsec	ured Claims			12	2/15
any executory contracts or unexpired leases that could result in a claim. Also list executory contracts and Unexpired Leases (Official Form 1066). Do not include any creditors with partially secured claims that are listed in Schedule D: Executory Contracts and Unexpired Leases (Official Form 1066). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1:						r creditors with NON	PRIORITY clair		
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No. Go to Part 2. Yes. Yes.	_								
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Internal Revenue Service		(For an explanat	tion of each type of claim, see the ins	tructions for this f	orm in the instruction booklet.)	Total claim	-	•	•
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Is the claim subject to offset? ☐ Claims for death or personal injury while you were intoxicated No ☐ Other. Specify		☐ At least one	e of the debtors and another	☐ Domestic	support obligations				
■ No □ Other. Specify		☐ Check if th	nis claim is for a community debt	Taxes and	certain other debts you owe the	government			
			ubject to offset?	☐ Claims for	death or personal injury while yo	u were intoxicated			
□ Yes notice only				Other. Spe					
		☐ Yes			notice only				

ebtor 1 Christopher I Good ebtor 2 Heidi M Beck		Case number (if know)			
Michigan Department of Treasury	Last 4 digits of account number	\$0.00	<u> </u>	0.00	\$0.00
Priority Creditor's Name Dept 77437 PO Box 77000 Detroit MI 40277	When was the debt incurred?		_		
Detroit, MI 48277 Number Street City State Zlp Code	As of the date you file, the claim is:	Check all that apply			
Who incurred the debt? Check one.	☐ Contingent				
Debtor 1 only	☐ Unliquidated				
Debtor 2 only	☐ Disputed				
■ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:				
_	Domestic support obligations				
☐ At least one of the debtors and another	_				
☐ Check if this claim is for a community debt	■ Taxes and certain other debts you□ Claims for death or personal injury	-			
Is the claim subject to offset?		wrille you were intoxicated			
☐ Yes	Other. Specify notice only				
 No. You have nothing to report in this part. Submit ■ Yes. List all of your nonpriority unsecured claims in the 	this form to the court with your other sche	holds each claim. If a cred			
No. You have nothing to report in this part. Submit■ Yes.	this form to the court with your other sche alphabetical order of the creditor who aim. For each claim listed, identify what t	holds each claim. If a cred	claims already inc	luded in Part Continuation	1. If more Page of
■ Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each claim one creditor holds a particular claim, list the other Part 2. Ann Arbor Credit Bureau/A2CB	this form to the court with your other sche alphabetical order of the creditor who aim. For each claim listed, identify what t	holds each claim. If a cred	claims already inc	luded in Part Continuation Total claim	1. If more Page of
■ No. You have nothing to report in this part. Submit ■ Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each claim one creditor holds a particular claim, list the other Part 2.	alphabetical order of the creditor who aim. For each claim listed, identify what t creditors in Part 3.If you have more than	holds each claim. If a cred ype of claim it is. Do not list of three nonpriority unsecured	claims already inc claims fill out the	luded in Part Continuation Total claim	1. If more Page of
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	1 Christopher I Good 2 Heidi M Beck		Case number (if know)			
4.2	Bank Of America Nonpriority Creditor's Name	Last 4 digits of account number	7000	\$22,587.00		
	Nc4-105-03-14 Po Box 26012 Greensboro, NC 27410	When was the debt incurred?	Opened 03/05 Last Active 3/03/16			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Credit Card	<u> </u>			
4.3	Bank Of America Nonpriority Creditor's Name	Last 4 digits of account number	5723	\$5,970.00		
	Nc4-105-03-14 Po Box 26012 Greensboro, NC 27410	When was the debt incurred?	Opened 10/07 Last Active 7/25/16			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims				
	■ No	☐ Debts to pension or profit-sharin				
	Yes	Other. Specify Credit Card	<u> </u>			
4.4	Bank Of America Nonpriority Creditor's Name	Last 4 digits of account number	2743	\$431.00		
	Nc4-105-03-14 Po Box 26012	When was the debt incurred?	Opened 02/16 Last Active 8/04/16			
	Greensboro, NC 27410 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i				
	Debtor 1 only		_			
	Debtor 2 only	☐ Contingent				
	_	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans				
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims				
	No	Debts to pension or profit-sharin				
	Yes	■ Other. Specify Credit Card				
		· · · ———				

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

	1 Christopher I Good 2 Heidi M Beck		Case number (if know)	
4.5	Chase Card Services Nonpriority Creditor's Name	Last 4 digits of account number	1559	\$12,228.00
	Attn: Correspondence Dept Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 05/02 Last Active 7/27/16	
	Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.6	Discover Financial	Last 4 digits of account number	3981	\$6,191.00
	Nonpriority Creditor's Name Po Box 3025 New Albany, OH 43054	When was the debt incurred?	Opened 01/11 Last Active 8/04/16	
=	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing		
	Yes	Other. Specify Credit Card	<u> </u>	
4.7	EdFinancial Services, LIc Nonpriority Creditor's Name	Last 4 digits of account number	6924	\$16,746.00
	298 North Seven Oaks Dr Knoxville, TN 37922	When was the debt incurred?	Opened 07/06 Last Active 10/28/15	
-	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i		
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharing		
	☐ Yes			
		Educationa	ı	

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

	1 Christopher I Good 2 Heidi M Beck		Case number (if know)		
4.8	EdFinancial Services, LIc Nonpriority Creditor's Name	Last 4 digits of account number	6824	\$12,847.00	
	298 North Seven Oaks Dr Knoxville, TN 37922	When was the debt incurred?	Opened 07/06 Last Active 10/28/15		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	☐ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	d claim:		
	☐ At least one of the debtors and another☐ Check if this claim is for a community	Student loans	a cium.		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	☐ Yes	Other. Specify			
		Educationa	I		
4.9	EdFinancial Services, LIc Nonpriority Creditor's Name	Last 4 digits of account number	6624	\$6,675.00	
	298 North Seven Oaks Dr Knoxville, TN 37922	When was the debt incurred?	Opened 09/09 Last Active 10/28/15		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	☐ Debtor 1 only	☐ Contingent			
	■ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing			
	□Yes	Other. Specify	Other. Specify		
		Educationa	ıl		
4.1 0	EdFinancial Services, Llc	Last 4 digits of account number	6724	\$4,609.00	
	Nonpriority Creditor's Name 298 North Seven Oaks Dr Knoxville, TN 37922	When was the debt incurred?	Opened 05/10 Last Active 10/28/15		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	Debtor 1 only	☐ Contingent			
	■ Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify			
		Educationa	.1		

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

	1 Christopher I Good 2 Heidi M Beck		Case number (if know)			
4.1	EdFinancial Services, Llc	Last 4 digits of account number	6424	\$4,535.00		
	Nonpriority Creditor's Name 298 North Seven Oaks Dr Knoxville, TN 37922	When was the debt incurred?	Opened 09/09 Last Active 10/28/15			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	☐ Debtor 1 only	☐ Contingent				
	■ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:			
	☐ Check if this claim is for a community debt	■ Student loans	ration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify				
		Educationa	1			
4.1 2	EdFinancial Services, LIc Nonpriority Creditor's Name	Last 4 digits of account number	6524	\$4,535.00		
	298 North Seven Oaks Dr Knoxville, TN 37922	When was the debt incurred?	Opened 04/10 Last Active 10/28/15			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	☐ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:			
	☐ Check if this claim is for a community debt	■ Student loans □ Obligations arising out of a sena	ration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims				
	■ No		profit-sharing plans, and other similar debts			
	Yes	Other. Specify				
		Educationa	<u> </u>			
4.1 3	Us Bank Nonpriority Creditor's Name	Last 4 digits of account number	5941	\$5,540.00		
	4325 17th Ave S Fargo, ND 58125	When was the debt incurred?	Opened 05/13 Last Active 3/01/16			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts			
	☐ Yes	■ Other Specify Credit Card				
		— Other opening				

Part 3: List Others to Be Notified About a Debt That You Already Listed

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 6 of 7

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

Debtor 1 Christopher I Good Debtor 2 Heidi M Beck		Case number (if know)		
have more than one creditor for any of the notified for any debts in Parts 1 or 2, do not		the additional creditors here. If you do not have additional persons to be		
Name and Address	On which entry in Part 1 or Part	2 did you list the original creditor?		
The Leduc Group	Line 4.1 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims		
PO Box 2191 Royal Oak, MI 48068		Part 2: Creditors with Nonpriority Unsecured Claims		
	Last 4 digits of account number			
Name and Address	On which entry in Part 1 or Part	On which entry in Part 1 or Part 2 did you list the original creditor?		
U of M Credit Union	Line 4.1 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims		
PO Box 7850 Ann Arbor, MI 48107		■ Part 2: Creditors with Nonpriority Unsecured Claims		
	Last 4 digits of account number			
Name and Address	On which entry in Part 1 or Part	2 did you list the original creditor?		
US Attorney	Line 2.1 of (Check one):	■ Part 1: Creditors with Priority Unsecured Claims		
Attn: Civil Division		☐ Part 2: Creditors with Nonpriority Unsecured Claims		
211 W. Fort Street				
Suite 2001				
Detroit, MI 48226				

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
	6f.	Student loans	6f.	\$ Total Claim 49,947.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 72,039.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 121,986.00

Last 4 digits of account number

Fill in this inform	Fill in this information to identify your case:							
Debtor 1	Christopher I God	od						
	First Name	Middle Name	Last Name					
Debtor 2	Heidi M Beck							
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States Bankruptcy Court for the:		EASTERN DISTRICT C	PF MICHIGAN					
Case number					☐ Check if this is an amended filing			

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with Name, Number	whom you have th r, Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
.1					
	Name				
	Number	Street			
	City		State	ZIP Code	
.2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			
	City		State	ZIP Code	_
.4					
	Name				
	Number	Street			_
	City		State	ZIP Code	
.5					
	Name				_
	Number	Street			
	City		State	ZIP Code	<u> </u>

Fill in this	information to identify your	case:			
Debtor 1	Christopher I Goo	Middle Name	Loot Nome		
Debtor 2	Heidi M Beck	мідаіе мате	Last Name		
(Spouse if, filir		Middle Name	Last Name		
United Sta	tes Bankruptcy Court for the:	EASTERN DISTRICT C	F MICHIGAN		
Case numb	ber				
(if known)					☐ Check if this is an
					amended filing
Official	l Form 106H				
Sched	lule H: Your Cod	ebtors			12/15
	s hin the last 8 years, have you la, California, Idaho, Louisiana,				y states and territories include
3. In Colin line	2 again as a codebtor only i	ors. Do not include your f that person is a guaran	spouse as a codebto	sure you have listed th	g with you. List the person showr ne creditor on Schedule D (Officia Schedule E/F, or Schedule G to fi
	Column 1: Your codebtor Name, Number, Street, City, State and ZI	P Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1				□ Schodulo D. lin	0
	Name				
				☐ Schedule G, line	
=	Number Street			<u> </u>	
	City	State	ZIP Code		
3.2				☐ Schedule D, line	e
	Name			☐ Schedule E/F, I	
				☐ Schedule G, line	e
	Number Street	_		_	
	City	State	ZIP Code		

Fill in this informa	tion to identify your case:	
Debtor 1	Christopher I Good	
Debtor 2 (Spouse, if filing)	Heidi M Beck	
United States Bar	nkruptcy Court for the: EASTERN DISTRICT OF MICHIGAN	
Case number		Check if this is:
(If known)		☐ An amended filing
		A supplement showing postpetition chapter 13 income as of the following date:
Official Fo	<u>rm 106l</u>	MM / DD/ YYYY
Schedule	I: Your Income	12/1:

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment Fill in your employment Debtor 1 Debtor 2 or non-filing spouse information. Employed ■ Employed If you have more than one job, **Employment status** attach a separate page with ■ Not employed ■ Not employed information about additional employers. Occupation RNdriver/market assistant Include part-time, seasonal, or Una Farm LLC dba Garden self-employed work. Employer's name **VA Hospital** Works Occupation may include student or homemaker, if it applies. **Employer's address** 1205 W Joy Road 2215 Fuller Road Ann Arbor, MI 48105 Ann Arbor, MI 48105 How long employed there? since 2005 since 2011

Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 0.00 5,001.86 deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. 0.00 3. 0.00 Calculate gross Income. Add line 2 + line 3. 0.00 5,001.86

Debtor 1 Christopher I Good Heidi M Beck

Case number (if known)

			For Debtor 1				For Debtor 2 or non-filing spouse		
	Сору	y line 4 here	4.	\$	0.00	\$			
5.	List a	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	904.41		
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$			
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$			
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00		
	5e.	Insurance	5e.	\$	0.00	\$	368.77		
	5f.	Domestic support obligations	5f.	\$_	0.00	\$	0.00		
	5g.	Union dues	5g.	\$_	0.00	\$	0.00		
	5h.	Other deductions. Specify:	_ 5h.+	* _	0.00	+ \$	0.00		
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	0.00	\$	1,570.01		
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	0.00	\$	3,431.85		
8.	List a 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	0.00		
	8b.	Interest and dividends	8b.	\$_	0.00	\$			
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$			
	8d.	Unemployment compensation	8d.	\$_	0.00	\$			
	8e.	Social Security	8e.	\$_	0.00	\$			
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	0.00		
	8g.	Pension or retirement income	8g.	\$_	0.00	\$	0.00		
		Farm income (1099) (average							
	8h.	Other monthly income. Specify: Feb-July 2016)	_ 8h.+		590.33	,			
		Band income (average Feb - July 2016)	_	\$_	259.42	\$	0.00		
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	849.75	\$	0.00		
10.		ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		849.75 + \$,	3,431.85	1,281.60	
11.	11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00								
12.	12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. \$ 4,281.60							1,281.60	
							Combine		
13.	Do yo	ou expect an increase or decrease within the year after you file this form No.	?				monthly i	income	
		Yes. Explain: She is contingent and believes that she will be w	orkin	g 48	hours bi-weel	dy.			

5 80 8	in this informa	ition to identify yo	our casa:			I					
Debt	Christopher I Good					Check if this is: An amended filing					
	Debtor 2 Spouse, if filing) Heidi M Beck						A supplement showing postpetition chapter 13 expenses as of the following date:				
Unite	ed States Bankı	ruptcy Court for the	EASTE	RN DISTRICT OF MICHI	GAN	Ī	MM / DD / YYYY				
1	e number nown)										
		orm 106J									
Be a	as complete ormation. If m		possible.	. If two married people a ch another sheet to this							
Part	1: Desci	ribe Your House	hold								
١.	□ No. Go to		in a separ	ate household?							
	■ N	0		al Form 106J-2, <i>Expense</i>	s for Separate House	ehold of Debte	or 2.				
2.	Do you hav	e dependents?	□ No								
	Do not list D Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relati		Dependent's age	Does dependent live with you?			
	Do not state dependents				daughter		18 months	□ No ■ Yes □ No □ Yes □ No □ Yes □ No			
3.	expenses o yourself an	penses include f people other tl d your depende late Your Ongoi	han nts? □	No Yes				□ No □ Yes			
Esti exp	imate your ex	cpenses as of yo	our bankrı	uptcy filing date unless y is filed. If this is a sup							
the		h assistance and		government assistance cluded it on <i>Schedule I:</i>			Your expe	enses			
4.		or home owners		ses for your residence.	Include first mortgage	e 4. \$		1,587.00			
	If not include	led in line 4:									
	4a. Real	estate taxes				4a. \$		0.00			
	4b. Prope	rty, homeowner's				4b. \$		0.00			
		maintenance, re owner's associat		upkeep expenses		4c. \$ 4d. \$		50.00 0.00			
5.				our residence, such as he	ome equity loans	5. \$		0.00			

Official Form 106J Schedule J: Your Expenses 16-51556-mbm Doc 1 Filed 08/18/16 Entered 08/18/16 17:28:00 Page 33 of 51

☐ Yes. Explain here:

Official Form 106J Schedule J: Your Expenses 16-51556-mbm Doc 1 Filed 08/18/16 Entered 08/18/16 17:28:00 Page 34 of 51

Fill in this i	nformation to identify your	case:		
Debtor 1				
Debioi i	Christopher I God First Name	Middle Name	Last Name	
Debtor 2	Heidi M Beck			
(Spouse if, filing		Middle Name	Last Name	
United State	es Bankruptcy Court for the:	EASTERN DISTRICT O	OF MICHIGAN	
Case number	or			
(if known)				☐ Check if this is an amended filing
You must fil	le this form whenever you fi	ile bankruptcy schedule		information. king a false statement, concealing property, or es up to \$250,000, or imprisonment for up to 20
	Sign Below			
Did yo	ou pay or agree to pay some	one who is NOT an atto	rney to help you fill out bank	uptcy forms?
■ N	0			
□ Y	es. Name of person			Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
	penalty of perjury, I declare by are true and correct.	that I have read the sum	nmary and schedules filed wi	th this declaration and
	Christopher I Good		X /s/ Heidi M Bed	:k
	nristopher I Good gnature of Debtor 1		Heidi M Beck Signature of Deb	or 2
Dat	te August 18, 2016		Date August	18, 2016

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

Ξij	I in this inform	nation to identify you	r case:			
	btor 1					
De	DIOI I	Christopher I Go First Name	Middle Name	Last Name		
	btor 2	Heidi M Beck				
(Sp	ouse if, filing)	First Name	Middle Name	Last Name		
Un	ited States Ba	nkruptcy Court for the:	EASTERN DISTRICT OF	MICHIGAN		
	se number _				_	heck if this is an mended filing
St Be info	as complete a	of Financial	attach a separate sheet to	re filing together, both are	ankruptcy equally responsible for supply additional pages, write you	
			arital Status and Where You	Lived Before		
1.	Married Not ma		is :			
2.	■ No		lived anywhere other than vived in the last 3 years. Do no	·		
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. stat					ity property state or territory co, Texas, Washington and W	
Do		•	hedule H: Your Codebtors (Of	ificial Form 106H).		
4.	Did you hav	al amount of income yo		all businesses, including part-		ndar years?
	□ No ■ Yes. Fil	I in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
the date were filed for benchmarkers.			☐ Wages, commissions, bonuses, tips	\$5,401.00	■ Wages, commissions, bonuses, tips	\$23,209.32
			Operating a business		☐ Operating a business	

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

				Debtor 1					Debtor 2		
				Sources of Check all tha		(befo	s income re deductions an sions)		Sources of ind Check all that a		Gross income (before deductions and exclusions)
	r last caler anuary 1 to	dar year: December	31, 2015)	☐ Wages, of bonuses, tip	commissions, s		\$3,811.0		■ Wages, con	nmissions,	\$32,692.00
				Operating	g a business				☐ Operating a	business	
		dar year be December		☐ Wages, o	commissions, s		\$-10,809.0		■ Wages, conbonuses, tips	nmissions,	\$85,856.00
				Operating	g a business				☐ Operating a	business	
.	Include in and other winnings. List each	come regard public bene If you are fil	dless of wheth fit payments; ing a joint cas the gross inco	ner that income pensions; rent se and you hav	e is taxable. Exa tal income; inter re income that y	amples of est; dividence ou rece		re alim ollected t it only	I from lawsuits; once under D	royalties; an ebtor 1.	ecurity, unemployment, d gambling and lottery
				Debtor 1					Debtor 2		
				Sources of Describe bel		each (befo	s income from source re deductions an sions)		Sources of ind Describe below		Gross income (before deductions and exclusions)
Pa	rt 3: Lis	t Certain Pa	yments You	Made Before	You Filed for I	Bankru	otcy				
6.	Are eithe ☐ No.	Neither De individual During the	ebtor 1 nor E primarily for a 90 days befo	Debtor 2 has parents personal, famore you filed fo	nily, or househol	ı mer de ld purpo	bts. Consumer o			_	1(8) as "incurred by an
		□ _{No.}	Go to line 7								
		☐ Yes	paid that cr not include	editor. Do not payments to a	include paymen an attorney for th	nts for do	mestic support o	obligati	ons, such as cl	nild support a	ne total amount you nd alimony. Also, do
	■ Yes.				orimarily consu r bankruptcy, di		bts. ay any creditor a	total of	f \$600 or more	?	
		□ _{No.}	Go to line 7	7							
		■ Yes	List below e include pay	each creditor to	nestic support ol						t creditor. Do not nclude payments to an
	Creditor	's Name and	d Address	E	ates of payme	nt	Total amount		Amount you still owe	Was this p	payment for
	4212 50	Mtg Svcs th St k, TX 7941			une, July, August 2016		\$4,761.00		152,718.00	■ Mortgae □ Car □ Credit (□ Loan R □ Supplie □ Other	Card epayment rs or vendors

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

No. Go to line 11.

Yes. Fill in the information below

Creditor Name and Address Value of the Describe the Property Date property Explain what happened

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

No

Yes. Fill in the details.

Creditor Name and Address Describe the action the creditor took Date action was Amount taken

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 3

Debtor Debtor			Case number (if known)	
	thin 1 year before you filed for bank urt-appointed receiver, a custodian, No	ruptcy, was any of your property in the posse or another official?	ession of an assignee for the ben	efit of creditors, a
	Yes			
Part 5:	List Certain Gifts and Contribution	ons		
3. Wi ■	thin 2 years before you filed for ban No Yes. Fill in the details for each gift.	kruptcy, did you give any gifts with a total val	ue of more than \$600 per person	?
G	ifts with a total value of more than \$ er person	Describe the gifts	Dates you gave the gifts	Value
	erson to Whom You Gave the Gift ar ddress:	nd		
4. W i ■	thin 2 years before you filed for ban No Yes. Fill in the details for each gift or	kruptcy, did you give any gifts or contribution	ns with a total value of more than	\$600 to any charity?
G m Cl	ifts or contributions to charities that ore than \$600 harity's Name ddress (Number, Street, City, State and ZIP Co	t total Describe what you contributed	Dates you contributed	Value
Part 6:	<u></u>	,		
	No Yes. Fill in the details. escribe the property you lost and ow the loss occurred	Describe any insurance coverage for the lo	loss	Value of property lost
		Include the amount that insurance has paid. L insurance claims on line 33 of <i>Schedule A/B:</i>		
Part 7:	List Certain Payments or Transfe	ers		
co Inc	nsulted about seeking bankruptcy o clude any attorneys, bankruptcy petition	ruptcy, did you or anyone else acting on your or preparing a bankruptcy petition? n preparers, or credit counseling agencies for ser		erty to anyone you
	No Yes. Fill in the details.			
A:	erson Who Was Paid ddress mail or website address erson Who Made the Payment, if No	Description and value of any propertransferred	erty Date payment or transfer was made	Amount of payment
M 6	IARRS & TERRY, PLLC 553 JACKSON AVE nn Arbor, MI 48103	\$410 = \$310 filing fee, \$50 for k Green Path courses, \$50 CIN fo		\$410.00
pro		ruptcy, did you or anyone else acting on your reditors or to make payments to your creditor hat you listed on line 16.		erty to anyone who
_	No			
P.	Yes. Fill in the details. erson Who Was Paid	Description and value of any prop	erty Date payment	Amount of
	ddress	transferred	or transfer was made	payment

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 4

Case number (if known)

	Person Who Was Paid Address	Description and value of any property transferred		erty	Date payment or transfer was made	Amount of payment
	DMB Financial LLC 500 Cummings Center Third Floor Beverly, MA 01915	\$921/month			March - July 2016	\$4,605.00
	Within 2 years before you filed for bankruptcy, transferred in the ordinary course of your busi Include both outright transfers and transfers made include gifts and transfers that you have already li No Yes. Fill in the details.	ness or financial affa as security (such as t	i irs? he granting of a se			
	Person Who Received Transfer Address	Description and v property transferr			ny property or received or debts change	Date transfer was made
	Person's relationship to you					
19.	Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protect No □ Yes. Fill in the details.		y property to a se	elf-settled tru	st or similar device o	of which you are a
	Name of trust	Description and v	alue of the prope	rty transferre	ed	Date Transfer was made
Par	List of Certain Financial Accounts, Instru	uments, Safe Deposit	Boxes, and Stor	age Units		
20.	Within 1 year before you filed for bankruptcy, visold, moved, or transferred? Include checking, savings, money market, or or houses, pension funds, cooperatives, associated No Yes. Fill in the details.	ther financial accour	nts; certificates o			,
		ast 4 digits of ccount number	Type of accouninstrument	clos	e account was sed, sold, ved, or asferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 yea cash, or other valuables?	r before you filed for	bankruptcy, any	safe deposit	box or other deposi	tory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, State and ZIP Code)		escribe the c	contents	Do you still have it?
22.	Have you stored property in a storage unit or p	place other than your	home within 1 ye	ear before yo	u filed for bankrupto	y?
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, State and ZIP Code)		escribe the c	contents	Do you still have it?

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Par	rt 9: Identify Property You Hold or Control for S	Someone Else						
23.	Do you hold or control any property that someo for someone.	ne else owns? Include any prope	rty you l	porrowed from, are storing fo	r, or hold in trust			
	■ No							
	Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Descri	ibe the property	Value			
Par	rt 10: Give Details About Environmental Informa	ation						
For	the purpose of Part 10, the following definitions	apply:						
	Environmental law means any federal, state, or toxic substances, wastes, or material into the ai regulations controlling the cleanup of these sub	ir, land, soil, surface water, groun						
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	-	law, wh	ether you now own, operate,	or utilize it or used			
	Hazardous material means anything an environment hazardous material, pollutant, contaminant, or s		s waste,	hazardous substance, toxic	substance,			
Rep	ort all notices, releases, and proceedings that yo	ou know about, regardless of whe	n they o	ccurred.				
24.	Has any governmental unit notified you that you	ı may be liable or potentially liable	under	or in violation of an environm	ental law?			
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	_	vironmental law, if you ow it	Date of notice			
25.	Have you notified any governmental unit of any	release of hazardous material?						
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)		vironmental law, if you ow it	Date of notice			
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.							
	■ No							
	Yes. Fill in the details.							
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature	e of the case	Status of the case			
Par	rt 11: Give Details About Your Business or Con	nections to Any Business						
27.	Within 4 years before you filed for bankruptcy, o	did you own a business or have a	ny of the	e following connections to an	y business?			
	■ A sole proprietor or self-employed in a to	•	•	•				
	☐ A member of a limited liability company							
	☐ A partner in a partnership	, , , , , , , , , , , , , , , , , , , ,	, <u>(</u> ,	•				
	☐ An officer, director, or managing executi	ive of a corporation						
	☐ An owner of at least 5% of the voting or	·						

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Debto Debto	r 1 Christopher I Good r 2 Heidi M Beck	C	ase number (if known)
	No. None of the above applies. G	o to Part 12.		
	Yes. Check all that apply above ar	nd fill in the details below for each business.		
-	Business Name Address Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper		r Identification number clude Social Security number or ITIN.
`		Name of accountant of bookkeeper	Dates bu	siness existed
	Mutual Kumquat 605 Robin Road	musician	EIN:	2090
1	Ann Arbor, MI 48103	self prepared	From-To	2002 - present
	Friends With The Weather	musician	EIN:	2090
	Ann Arbor, MI 48103	self prepared	From-To	2016- present
1	Yes. Fill in the details below. Name Address	Date Issued		
[]	Yes. Fill in the details below.	Date Issued		
Part 1	Yes. Fill in the details below. Name Address Number, Street, City, State and ZIP Code) 2: Sign Below read the answers on this Statement of the and correct. I understand that making	Date Issued of Financial Affairs and any attachments, and ing a false statement, concealing property, or up to \$250,000, or imprisonment for up to 20 years.	obtaining mo	oney or property by fraud in connection
Part 1 have re truith a 8 U.S	Yes. Fill in the details below. Name Address Number, Street, City, State and ZIP Code) Z: Sign Below read the answers on this Statement of the and correct. I understand that make bankruptcy case can result in fines us. C. §§ 152, 1341, 1519, and 3571.	of Financial Affairs and any attachments, and ing a false statement, concealing property, or	obtaining mo	oney or property by fraud in connection
Part 1 have re truith a B U.S	Yes. Fill in the details below. Name Address Number, Street, City, State and ZIP Code) Z: Sign Below read the answers on this Statement of the and correct. I understand that make bankruptcy case can result in fines upon the code of	of Financial Affairs and any attachments, and ing a false statement, concealing property, or up to \$250,000, or imprisonment for up to 20 your and the statement for up to 20	obtaining mo	oney or property by fraud in connection
Part 1 Part 1 nave re truith a 3 U.S	Yes. Fill in the details below. Name Address Number, Street, City, State and ZIP Code) Z: Sign Below read the answers on this Statement of the and correct. I understand that make bankruptcy case can result in fines us. C. §§ 152, 1341, 1519, and 3571. hristopher I Good	of Financial Affairs and any attachments, and ing a false statement, concealing property, or up to \$250,000, or imprisonment for up to 20 ye	obtaining mo	oney or property by fraud in connectio
Part 1 have re truith a B U.S	Yes. Fill in the details below. Name Address Number, Street, City, State and ZIP Code) Z: Sign Below read the answers on this Statement of the and correct. I understand that make bankruptcy case can result in fines upon the code of	of Financial Affairs and any attachments, and ing a false statement, concealing property, or up to \$250,000, or imprisonment for up to 20 your and the statement for up to 20	obtaining mo	oney or property by fraud in connectio
Part 1 Part 1 Part 1 Part 2 Part 2 Part 3 Part 4 Part 4	Yes. Fill in the details below. Name Address Number, Street, City, State and ZIP Code) Z: Sign Below read the answers on this Statement of the and correct. I understand that make bankruptcy case can result in fines us c.C. §§ 152, 1341, 1519, and 3571. hristopher I Good stopher I Good ature of Debtor 1 August 18, 2016	of Financial Affairs and any attachments, and ing a false statement, concealing property, or up to \$250,000, or imprisonment for up to 20 years. /s/ Heidi M Beck Heidi M Beck Signature of Debtor 2	obtaining me ears, or both	oney or property by fraud in connectio .
Part 1 // // // // // // // // // // // // /	Yes. Fill in the details below. Name Address Number, Street, City, State and ZIP Code) 2: Sign Below read the answers on this Statement of the and correct. I understand that make bankruptcy case can result in fines upon the code of	of Financial Affairs and any attachments, and ing a false statement, concealing property, or up to \$250,000, or imprisonment for up to 20 years. /s/ Heidi M Beck Heidi M Beck Signature of Debtor 2 Date August 18, 2016	obtaining me ears, or both	oney or property by fraud in connectio .
Part 1 // (Yes. Fill in the details below. Name Address Number, Street, City, State and ZIP Code) 2: Sign Below read the answers on this Statement of the and correct. I understand that make bankruptcy case can result in fines upon the code of	of Financial Affairs and any attachments, and ing a false statement, concealing property, or up to \$250,000, or imprisonment for up to 20 years. /s/ Heidi M Beck Heidi M Beck Signature of Debtor 2 Date August 18, 2016	obtaining me ears, or both	oney or property by fraud in connectio .
Part 1 Anave re tru ith a B U.S S/ Cl Chris Signa Date id you No I No	Yes. Fill in the details below. Name Address Number, Street, City, State and ZIP Code) 2: Sign Below read the answers on this Statement of the and correct. I understand that make bankruptcy case can result in fines us.C. §§ 152, 1341, 1519, and 3571. Indistopher I Good atture of Debtor 1 August 18, 2016 But attach additional pages to Your States and page of the page of	of Financial Affairs and any attachments, and ing a false statement, concealing property, or up to \$250,000, or imprisonment for up to 20 years. /s/ Heidi M Beck Heidi M Beck Signature of Debtor 2 Date August 18, 2016	obtaining me ears, or both	oney or property by fraud in connection

United States Bankruptcy Court Eastern District of Michigan

_	Christopher I Good	G N				
In re	Heidi M Beck		Case No.			
		Debtor(s)	Chapter	13		

STATEMENT OF ATTORNEY FOR DEBTOR(S) PURSUANT TO F.R.BANKR.P. 2016(b)

The undersigned, pursuant to F.R.Bankr.P. 2016(b), states that:

- 1. The undersigned is the attorney for the Debtor(s) in this case.
- 2. The compensation paid or agreed to be paid by the Debtor(s) to the undersigned is: [Check one]
 - [X] FLAT FEE

 - B. The undersigned shall bill against the retainer at an hourly rate of \$____. [Or attach firm hourly rate schedule.] Debtor(s) have agreed to pay all Court approved fees and expenses exceeding the amount of the retainer.
- 3. \$ **310.00** of the filing fee has been paid.
- 4. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: [Cross out any that do not apply.]
 - A. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
 - B. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
 - C. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
 - D. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;
 - E. Reaffirmations;
 - F. Redemptions;
 - G. Other:

THIS FIRM RESERVES THE RIGHT TO FORGO THE "NO LOOK FEE" AND INSTEAD FILE AN APPLICATION FOR FEES REPRESENTING TIME SPENT ON ANY CHAPTER 13 CASE. THIS MAY RESULT IN TOTAL FEES AND EXPENSES IN EXCESS OF THE ORIGINALLY QUOTED FEE. TIME SPENT ON YOUR CASE WILL BE BILLED IN INCREMENTS OF 6 MINUTES AND WILL INCLUDE ALL TIME SPENT BY ATTORNEYS AND STAFF IN THE PROSECUTION OF YOUR CASE INCLUDING TRAVEL TIME AND TELEPHONE CALLS. WORK PERFORMED AFTER CONFIRMATION WILL BE BILLED AT AN HOURLY RATE AS APPLICABLE AND WILL BE PAID THROUGH THE CHAPTER 13 PLAN UPON ENTRY OF AN ORDER AWARDING FEES PURSUANT TO A FEE APPLICATION. CLIENT IS RESPONSIBLE FOR PAYMENT OF FEES IF NOT PAID IN FULL THROUGH THE PLAN.

THE CLIENT(S) WILL BE RESPONSIBLE FOR FEES AND COSTS INCURRED AND NOT PAID THROUGH THE TRUSTEE. THIS MAY OCCUR DUE TO INADEQUATE PAYMENTS INTO THE PLAN OR FOR WORK PERFORMED ON BEHALF OF THE CLIENT(S) AFTER PAYMENTS INTO THE PLAN HAVE CEASED, TYPICALLY AT THE COMPLETION OF THE CASE.

5. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.

CHAPTER 7 CASES-THE ABOVE FEE DOES NOT INCLUDE REPRESENTATION IN ANY MOTION FOR RELIEF OR OTHER MOTION FILED BY EITHER THE CHAPTER 7 TRUSTEE OR UNITED STATES TRUSTEE. FEES FOR SUCH SERVICES ARE SEPARATE AND WOULD BE ADDRESSED IN A SEPARATE FEE AGREEMENT EXECUTED AT THE TIME SUCH ISSUE AROSE. THIS APPLIES TO ANY ADVERSARY PROCEEDING OR OTHER NON-DISCHARGEABILITY ACTION AS WELL. DEBTOR SHALL BE BILLED AN ADDITIONAL \$250 FOR ATTENDANCE AT ANY ADDITIONAL 341 MEETING OF THE CREDITORS.

6. The source of payments to the undersigned was from:				
	A. XX	Debtor(s)' earnings, wages, compen	sation for services performed	
	В.	Other (describe, including the ident	ity of payor)	
7.		nared or agreed to share, with any oth ation paid or to be paid except as follows:	er person, other than with members of the undersigned's law firm or ows:	
Dated:	August 18, 2016		/s/ Michelle Marrs	
			Attorney for the Debtor(s)	
			Michelle Marrs P59651	
			Marrs & Terry, PLLC	
			6553 Jackson Rd	
			Ann Arbor, MI 48103	
			734-663-0555 TTerry@marrsterry.com	
Agreed:	/s/ Christopher I Goo	d	/s/ Heidi M Beck	
-	Christopher I Good		Heidi M Beck	
	Debtor		Debtor	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the Chapter 7 Means Test Calculation (Official Form 122A-2).

If your income is above the median for your state, you must file a second form —the Chapter 7 Means Test Calculation (Official Form 122A-2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the Means Test, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called exempt property. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on Schedule C: The Property You Claim as Exempt (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_form s.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on Voluntary Petition for Individuals Filing for Bankruptcy (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together-called a joint case. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days before you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court Eastern District of Michigan

In re	Christopher I Good Heidi M Beck		Case No.	
		Debtor(s)	Chapter	13
The ab		TICATION OF CREDITOR Note that the attached list of creditors is true and core		of their knowledge.
Date:	August 18, 2016	/s/ Christopher I Good Christopher I Good		
Date:	August 18, 2016	Signature of Debtor /s/ Heidi M Beck Heidi M Beck Signature of Debtor		

Ann Arbor Credit Bureau/A2CB Ann Arbor Credit Bureau, Inc; Attn: Bank 311 North Main Street Ann Arbor, MI 48104

Bank Of America Nc4-105-03-14 Po Box 26012 Greensboro, NC 27410

Capital Mtg Svcs Of Te 4212 50th St Lubbock, TX 79413

Chase Card Services Attn: Correspondence Dept Po Box 15298 Wilmington, DE 19850

Discover Financial Po Box 3025 New Albany, OH 43054

EdFinancial Services, Llc 298 North Seven Oaks Dr Knoxville, TN 37922

Harris N.a.

Bmo Harris Bank - Bankruptcy Dept.-Brk-1
770 N Water Street
Milwaukee, WI 53202

Internal Revenue Service PO Box 7346 Philadelphia, PA 19101

Michigan Department of Treasury Dept 77437 PO Box 77000 Detroit, MI 48277

The Leduc Group PO Box 2191 Royal Oak, MI 48068 U of M Credit Union PO Box 7850 Ann Arbor, MI 48107

US Attorney Attn: Civil Division 211 W. Fort Street Suite 2001 Detroit, MI 48226

Us Bank 4325 17th Ave S Fargo, ND 58125